

Credential Application

Remit to:
 State of Wisconsin
 Department of Commerce-Credentialing
 P.O. Box 78780
 Milwaukee WI 53293-0780
 Phone (608) 261-8500
 TDD #: (608) 264-8777
 7:45 a.m. - 4:30 p.m.

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m)].

THE CREDENTIAL WILL NOT BE PROCESSED UNLESS YOU:

- A. Sign and date this form;
- B. Submit a complete application with all blanks filled in or marked non-applicable;
- C. Attach the specified fee; and
- D. Attach documents if specified on this application.

Instructions: Please review the pre-printed information in the boxed portions of this application. Clearly print corrections or new information where needed. Please use a color of ink other than black. **Be certain to sign and date the application.** The applicant's social security number is mandatory information. **Make a photocopy of the completed application for your records.**

By signing below, the applicant swears that all information provided on this application is true, accurate and that the credential requirements are met. **Notice: Information collected may be used for participation surveys, eligibility for approvals, law enforcement (including child support and tax delinquency enforcement) purposes and other secondary purposes. The Department may also provide this information to requesters pursuant to Wisconsin's open records law, ss. 19.31-19.39 stats. Social security numbers are required when applying for a license according to Wisconsin Stats. But they may not be disclosed to anyone except other State of Wisconsin governmental agencies.**

Applicant's Signature	Date (mo/day/yr)
Applicant Information	
Applicant's Social Security No:	
Applicant's Name (First, Middle and Last):	
Address No. & Street, or P.O. Box:	
City, Town or Village, State, Zip + 4 Code:	
Country, If Other Than United States:	
Telephone No. (include area code):	
If Available, Fax No. (include area code):	
If Available, Internet Address:	

BEGINNER ELECTRICIAN CERTIFICATION

Application and Credential Fee (nonrefundable): \$115.00 class code 7631

Make checks payable to: Department of Commerce. The fee consists of a \$35 application fee and a credential fee of \$80. The \$80 credential fee has been prorated because the credential expires on a specific date. The credential will be effective for 4 years from June 30th. Office location: 201 W. Washington Ave, Madison. Mailing address: PO Box 7082, Madison, WI 53707.

Reason for Credential: A person who holds a credential issued by the department as a certified electrical contractor, certified electrical contractor-restricted, certified master electrician, certified journeyman electrician or certified beginning electrician may perform electrical construction work in a municipality which requires licensure to perform electrical work pursuant to s. 101.87 (2) to (4), Stats., and in accordance with local ordinances. Chapter Comm 5 establishes a statewide certification of electricians in various classes, master, journeyman and beginning, recognizing their knowledge and abilities. When an electrician certification is required and what category of certification is needed are determined by individual municipalities.

Requirements of Credential: No person may advertise as a certified electrical contractor, certified master electrician, certified journeyman electrician or certified beginning electrician unless the person holds the appropriate credential.

A person who holds the credential shall carry on his or her person the credential issued by the department while performing or conducting the activity or activities permitted under the credential.